EXHIBIT D

Part 9

Patricia Ridzon 802 Rock O'Dundee Rd So. Dartmouth, MA 02748 Account #69 00 3071 3 00 January 26,2009

To: Irving H. Picard, Esq.

According to your instructions, I am sending the following to you:

Document A- The latest report of the value of my account

Documents B1 thru B13--a complete record of all deposits to my account

Document C-- a complete record of the withdrawals from my account

Document D- A record of the recharacterization of my traditional IRA to my Roth IRA # 69 00 3071 3 00

I also enclose a letter and confirmations forwarded to me from Dennis Clark of the Westport National Bank and the completed claim form.

Please do not hesitate to contact me if more information is needed. 508 636 6370 or toridzon@comcast.net

Thank you,

Patricia Ridzon

08-01789-cgm Doc 4111-22 Filed 05/27/11 Entered 05/27/11 17:31:44 Exhibit D Part 9 Pg 3 of 16

CUSTOMER CLAIM

Claim Number	r - u , ya j
Date Received	* 144Q7

BERNARD L. MADOFF INVESTMENT SECURITIES LLC

In Liquidation

DECEMBER 11, 2008

Irving H. Picard, Esq. Luislee for Bernard L. Madoff Investment Secreties LLC Claims Processing Center 2100 McKinney Ave., Suite 800 Dallas, TX 75201

f^arovide your office and home telephone no. OFFICE:

HOME: 508 636 6370

Taxpayer LD, Number (Social Security No.)

THE SHIP HEREIT

Account Number 1000106 WESTPORT NATIONAL BANK ATTN DENNISPICIARK VP 1495 POST ROAD DAST WESTPORT, CT 00880

(It incorrect, please change)

NOTE

BEFORE COMPLICTING THIS CLAIM FORM, BE SURE TO READ CAREFULLY THE ACCOMPANYING INSTRUCTION SHEET. A SEPARATE CLAIM FORM SHOULD BE FILED FOR EACH ACCOUNT AND, TO RECEIVE THE FULL PROTECTION AFFORDED UNDER SIPA, ALL CUSTOMER CLAIMS MUST BE RECEIVED BY THE TRUSTEE ON OR BEFORE March 4, 2009. CLAIMS RECEIVED AFTER THAT DATE, BUT ON OR BEFORE July 2, 2009, WILL BE SUBJECT TO DELAYED PROCESSING AND TO BEING SATISFIED ON TERMS LESS FAVORABLE TO THE CLAIMANT, PLEASE SEND YOUR CLAIM FORM BY CERTIFIED MAIL - RETURN

- Claim for money balances as of December 11, 2008; 1.
 - The Broker owes me a Credit (Cr.) Balance of
 - Lowe the Broker a Debit (Dr.) Balance of

\$ 204, 443 07

08-01789-cgm Doc 4111-22 Filed 05/27/11 Entered 05/27/11 17:31:44 Exhibit D Part 9 Pg 4 of 16

information regarding any withdrawals you have ever made or payments rec from the Debtor.

Please explain any differences between the securities or cash claimed and the balance and securities positions on your last account statement. If, at any time complained in writing about the handling of your account to any person or erregulatory authority, and the complaint relates to the cash and/or securities that your seeking, please be sure to provide with your claim copies of the complaint a related correspondence, as well as copies of any replies that you received. PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLAN.
ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE
PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR
COMPLETION.

YES 3. Has there been any change in your account since December 11, 2008? If so, please explain. Are you or were you a director, officer, 4. partner, shareholder, lender to or capital contributor of the broker? 5. Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker? Are you related to, or do you have any G, business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s) 1 is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming. 8. I-lave you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.

08-01789-cgm Doc 4111-22 Filed 05/27/11 Entered 05/27/11 17:31:44 Exhibit D Part 9 Pg 5 of 16

	C.	If you wish to repay the Debit Balance,		
		please insert the amount you wish to repay		
		attach a check payable to "Irving H. Picard	and	
		Trustee for Bernard L. Madare L.	, Esq.,	
		Trustee for Bernard L. Madoff Investment	Securities LLC."	
		If you wish to make a payment, it must be	enclosed	
		with this claim form.	q.	
	d_x	If balance is zero, insert "None."	el)	·
2.	Cla	m for securities as of December 11, 2008;	Want of the state	
PLEAS	od 3	NOT CLAIM ANY SECURITIES YOU HAVE	IN VOUS BOX	
			MCTOOK POSSE	SSION.
			YES	NO.
	a.	The Broker owes me securities		The state of the s
2	15	I owe the Broker securities	×	and the second s
¥	C.	If yes to either, please list below:	Al-Maria	the same of the sa
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Date c	of		Number o <u>Face Amou</u>	f Shares c nt of Bond
Transac	ction		The Broker	LOwe
(trade d	ate)	Name of Security	Owes Me	the Broke
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		Westport Material Bank	- amin	
	********	Westport National Bank		18
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Proper documentation can speed the review, allowance and satisfaction of you claim and shorten the time required to deliver your securities and cash to you sale confirmations and checks which relate to the securities or cash you claim, an any other documentation, such as correspondence, which you believe will be a documentation (such as cancelled checks, receipts from the Debtor, proof of wind transfers, etc.) of your deposits of cash or securities with the Debtor from as fix back as you have documentation. You should also provide all documentation of

08-01789-cgm Doc 4111-22 Filed 05/27/11 Entered 05/27/11 17:31:44 Exhibit D Part 9 Pg 6 of 16

9.	Have you or any member of your family ever filed a claim under the Securities
	Investor Protection Act of 1970? if
	so, give name of that broker.
	Please list the full name and address of anyone assisting you in the preparation of this claim form:
lf you case,	annot compute the amount of your claim, you may file an estimated claim. In the lease indicate your claim is an estimated claim.
	A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAII ICTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 C SONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.
THE	FOREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF ${f L}$
Date	1/27/09 Signature Talricia Redyn
Date	. Signature
(If ov addr than	nership of the account is shared, all must sign above. Give each owner's names, phone number, and extent of ownership on a signed separate sheet. If othersonal account, e.g., corporate, trustee, custodian, etc., also state your capaculhority. Please supply the trust agreement or other proof of authority.)

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to:

Irving H. Picard, Esq.,
Trustee for Bernard L. Madoff Investment Securities LLC
Claims Processing Center
2100 McKinney Ave., Suite 800
Dallas, TX 75201

Thomas J. Ridzon Rollover IRA Acc't # 69 01 1090 3 00 802 Rock O'Dundee Road So Dartmouth, MA 02748 Feb 12, 2009

To: Irving H. Picard, Esq.

According to your instructions, I enclose the following:

Completed claim form

Documentation of latest reported value i.e. 60,740,251 multiplied by my percentage of 0.027847=\$1, 691,433.

Documentation of deposits(highlighted in red) and transfers (highlighted in blue) from Westport Bank and Trust to WNB. All deposits were with BMLI and totalled \$ 1,167,490.

Documentation of withdrawals and distributions(highlighted in yellow) totalling \$375,000.

Documentation of recharacterization (highlighted in green) of my Rollover IRA to my Roth IRA.

Materials forwarded to me by WNB.

Please do not hesitate to notify me if more information is needed. 508 6366370 toridzon@comcast.net

Thank you,

Thomas J. Ridzon

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08-01789-cgm	Doc 4111-22 Filed 05/27/11 Part 9 Pg 8			
Z7.	CUSTOM	ER CLAIM	Claim	Number
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/	BERNARD L. MADOFF IN	VESTMENT SECUR	ITIES L	LC
ik	In Li	quidation		Al.
	DECEMI	BER 11, 2008		
lry	ing H. Picard, Esq.	Provide your office	and hor	ne telephone no.
Clair	L. Madoff Investment Securities LLC ns Processing Center cKinney Ave., Suite 800	OFFICE:		
2100 101	Dallas, TX 75201	HOME: <u>ಶೆಲ್ಪ೪'</u>	636	6370
HIMMINIM Account Number: 1W0106 WESTPORT NATIONAL BANK		Taxpayer I.D. Num	ber (So	cial Security No.)
ATTN: DENNIS P C	LARK V.P	3 6 "		
1495 POST ROAD EAST WESTPORT, CT 06880				
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(If incorr	rect, please change)			
	A			*
NOTE:	BEFORE COMPLETING THIS COMPANYING INSTRUCTION BE FILED FOR EACH ACCOUNT AFFORDED UNDER SIPA, ALL OF TRUSTEE ON OR BEFORE MAD ATE, BUT ON OR BEFORE PROCESSING AND TO BEING STATES.	ON SHEET. A SEPARA NT AND, TO RECEIVI CUSTOMER CLAIMS N arch 4, 2009. CLAIMS July 2, 2009. WILL B	ATE CLA E THE F MUST BE S RECEI E SUBJI	ULL PROTECTION RECEIVED BY THE IVED AFTER THAT ECT TO DELAYED

Claim for money balances as of **December 11, 2008_**: a. The Broker owes me a Credit (Cr.) Balance of 1.

RECEIPT REQUESTED.

I owe the Broker a Debit (Dr.) Balance of b.

\$	1,691	433.	C	ć^
•	RESILIENCE.			

CLAIMANT. PLEASE SEND YOUR CLAIM FORM BY CERTIFIED MAIL - RETURN

If you wish to repay the Debit Balance,

C.

		please insert the amount you wish to repart attach a check payable to "Irving H. Picare Trustee for Bernard L. Madoff Investment If you wish to make a payment, it must be	d, Esq., Securities LLC."	
		with this claim form.	\$	
	d.	If balance is zero, insert "None."		
2.	Clair	n for securities as of December 11 , 2008:	,*	
PLEASE	DO	NOT CLAIM ANY SECURITIES YOU HAV	E IN YOUR POSSE	SSION.
			YES	NO
	a.	The Broker owes me securities	THE RESERVE OF THE PARTY OF THE	
*	b.	I owe the Broker securities		*)
	C.	If yes to either, please list below:		
			Number of Shares Face Amount of Bo	
Date of Transact (trade da	tion	Name of Security	The Broker Owes Me (Long)	I Owe the Broker (Short)
-			-	
			-	
	 -			
				<u> </u>
			-	A 19 3

Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or

information regarding any withdrawals you have ever made or payments received from the Debtor.

Please explain any differences between the securities or cash claimed and the cash balance and securities positions on your last account statement. If, at any time, you complained in writing about the handling of your account to any person or entity or regulatory authority, and the complaint relates to the cash and/or securities that you are now seeking, please be sure to provide with your claim copies of the complaint and all related correspondence, as well as copies of any replies that you received.

PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

	e e	YES	NO
3.	Has there been any change in your account since December 11, 2008? If so, please explain.	<u> </u>	1/
4.	Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?		<u>/</u>
5.	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?		<u> </u>
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	· ·	<u>√</u>
7.	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.	Market Control of the	1
8.	Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.		1/

08-01789-cgm Doc 4111-22 Filed 05/27/11 Entered 05/27/11 17:31:44 Exhibit D Part 9 Pg 11 of 16

9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if
	so, give name of that broker.
	Please list the full name and address of anyone assisting you in the preparation of this claim form:
If you c case, p	annot compute the amount of your claim, you may file an estimated claim. In that lease indicate your claim is an estimated claim.
CONVI	A VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. CTION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR CONMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.
INFOR	OREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY MATION AND BELIEF.
Date	Feb-12, 2009 Signature Daynes Ledyn Signature
Date _	Signature
(If own address than a p	ership of the account is shared, all must sign above. Give each owner's name, s, phone number, and extent of ownership on a signed separate sheet. If other personal account, e.g., corporate, trustee, custodian, etc., also state your capacity thority. Please supply the trust agreement or other proof of authority.

This customer claim form must be completed and mailed promptly, together with supporting documentation, etc. to:

Irving H. Picard, Esq.,
Trustee for Bernard L. Madoff Investment Securities LLC
Claims Processing Center
2100 McKinney Ave., Suite 800
Dallas, TX 75201

Thomas J. Ridzon Roth IRA Acc't # 69003070300 802 Rock O'Dundee

Rd

02748

So Dartmouth, MA

Feb 1, 2009

To: Irving H. Picard, Esq.

In accord with instructions, I enclose the following-

Document of the total value on latest report from WNB (based

on the total worth of WNB omnibus account multiplied by the

of my ownership) i.e. \$60,740,251 times 0.010589 equalling \$643,178.

Documentation of five deposits totalling \$507,000.

Documentation of the recharacterization of \$500,000 of the above from my Traditional IRA in WNB to my Roth IRA in WNB.

Please do not hesitate to contact me if more information is required. 508-6366370 toridzon@comcast.net

Thank you

Thomas Ridzon

08-01789-cgm	Doc 4111-22	Filed 05/27/11	Entered 05/27/11 17:31:44	Exhibit D
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CUSTOMER CLAIM

Claim Number	
Date Received	

BERNARD L. MADOFF INVESTMENT SECURITIES LLC

In Liquidation

DECEMBER 11, 2008

Irving H. Picard, Esq.
Trustee for Bernard L. Madoff Investment Securities LLC
Claims Processing Center
2100 McKinney Ave., Suite 800
Dallas, TX 75201

Provide your office and home telephone no.

Taxpayer I.D. Number (Social Security No.)

Account Number: 1W0106
WESTPORT NATIONAL BANK
ATTN: DENNIS P CLARK V.P
1495 POST ROAD EAST
WESTPORT, CT 06880

(If incorrect, please change)

NOTE:

BEFORE COMPLETING THIS CLAIM FORM, BE SURE TO READ CAREFULLY THE ACCOMPANYING INSTRUCTION SHEET. A SEPARATE CLAIM FORM SHOULD BE FILED FOR EACH ACCOUNT AND, TO RECEIVE THE FULL PROTECTION AFFORDED UNDER SIPA, ALL CUSTOMER CLAIMS MUST BE RECEIVED BY THE TRUSTEE ON OR BEFORE March 4, 2009. CLAIMS RECEIVED AFTER THAT DATE, BUT ON OR BEFORE July 2, 2009, WILL BE SUBJECT TO DELAYED PROCESSING AND TO BEING SATISFIED ON TERMS LESS FAVORABLE TO THE CLAIMANT. PLEASE SEND YOUR CLAIM FORM BY CERTIFIED MAIL - RETURN RECEIPT REQUESTED.

- 1. Claim for money balances as of **December 11, 2008**:
 - a. The Broker owes me a Credit (Cr.) Balance of
 - b. I owe the Broker a Debit (Dr.) Balance of

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08-01789-cgm Doc 4111-22 Filed 05/27/11 Entered 05/27/11 17:31:44 Exhibit D Part 9 Pg 14 of 16

		C.	If you wish to repay the Debit Balance,			
			please insert the amount you wish to repa	y and		
			attach a check payable to "Irving H. Picare	d, Esq	•)	
			Trustee for Bernard L. Madoff Investment	Secui	rities LLC."	
			If you wish to make a payment, it must be	e encl	osed	
			with this claim form.		\$	www.complexicon
e		d.	If balance is zero, insert "None."		William III A STATE OF THE	<u>ئىسى بى</u> دىن بىردان دىچا ئارچا
	2.	Clair	m for securities as of December 11, 2008:			
	PLEASE	DO	NOT CLAIM ANY SECURITIES YOU HAVE	EINY	OUR POSSE	SSION.
				Y	<u>ES</u>	NO
		a.	The Broker owes me securities			are an extension of the same
	×	b.	I owe the Broker securities	**************************************		
		c.	If yes to either, please list below:			
	ottack	Jul 2	Į.		Number of Face Amour	
1	Date of	Ni			The Broker	l Owe
	Transact		Nome of Contribu		Owes Me	the Broker
	(trade da	(C)	Name of Security		(Long)	(Short)
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Proper documentation can speed the review, allowance and satisfaction of your claim and shorten the time required to deliver your securities and cash to you. Please enclose, if possible, copies of your last account statement and purchase or sale confirmations and checks which relate to the securities or cash you claim, and any other documentation, such as correspondence, which you believe will be of assistance in processing your claim. In particular, you should provide all documentation (such as cancelled checks, receipts from the Debtor, proof of wire transfers, etc.) of your deposits of cash or securities with the Debtor from as far back as you have documentation. You should also provide all documentation or

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PLEASE CHECK THE APPROPRIATE ANSWER FOR ITEMS 3 THROUGH 9.

NOTE: IF "YES" IS MARKED ON ANY ITEM, PROVIDE A DETAILED EXPLANATION ON A SIGNED ATTACHMENT. IF SUFFICIENT DETAILS ARE NOT PROVIDED, THIS CLAIM FORM WILL BE RETURNED FOR YOUR COMPLETION.

	ec.	YES	<u>NO</u>
3.	Has there been any change in your account since December 11, 2008? If so, please explain.	***************************************	V
4.	Are you or were you a director, officer, partner, shareholder, lender to or capital contributor of the broker?		V
5.	Are or were you a person who, directly or indirectly and through agreement or otherwise, exercised or had the power to exercise a controlling influence over the management or policies of the broker?		V
6.	Are you related to, or do you have any business venture with, any of the persons specified in "4" above, or any employee or other person associated in any way with the broker? If so, give name(s)	*	V
7.	Is this claim being filed by or on behalf of a broker or dealer or a bank? If so, provide documentation with respect to each public customer on whose behalf you are claiming.		V
8.	Have you ever given any discretionary authority to any person to execute securities transactions with or through the broker on your behalf? Give names, addresses and phone numbers.		<i>V</i>

9.	Have you or any member of your family ever filed a claim under the Securities Investor Protection Act of 1970? if so, give name of that broker.
	Please list the full name and address of anyone assisting you in the preparation of this claim form:
If you can case, ple	nnot compute the amount of your claim, you may file an estimated claim. In that ease indicate your claim is an estimated claim.
CONVIC	VIOLATION OF FEDERAL LAW TO FILE A FRAUDULENT CLAIM. TION CAN RESULT IN A FINE OF NOT MORE THAN \$50,000 OR DIMENT FOR NOT MORE THAN FIVE YEARS OR BOTH.
INFORM	DREGOING CLAIM IS TRUE AND ACCURATE TO THE BEST OF MY NATION AND BELIEF.
Date	2/1/09 Signature Thomas July
Date	Signature
address, than a pe	rship of the account is shared, all must sign above. Give each owner's name, phone number, and extent of ownership on a signed separate sheet. If other ersonal account, e.g., corporate, trustee, custodian, etc., also state your capacity nority. Please supply the trust agreement or other proof of authority.)

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Irving H. Picard, Esq.,
Trustee for Bernard L. Madoff Investment Securities LLC
Claims Processing Center
2100 McKinney Ave., Suite 800
Dallas, TX 75201